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SEC Potential persons who are to respond to the collection of information 1972 (6-contained in this form are not required to respond unless the form displays a currently valid OMB control number.

## ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

PROCESSED

SEP 0 3 2002

THOMSON FINANCIAL

# FORM D

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

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6.	OMB A	PPRO	VAL
ΟÑ	AB Num	ber: 323	35-0076
Ex	pires: Ma	ay 31, 2	005
Est	imated a	verage	burden
hοι	ırs per re	sponse	1

SEC USE ONLY						
Prefix		Serial				
DAT	E RECEI	VED				

Name of Offering ([] check if this is an amendment and name has changed, and indicate change.)

MONTEREY DEL MAR, S.A.

Filing Under (Check box(es) that apply):	[ ] <u>Rule 504</u>	[ ] <u>Rule 505</u>	[ <b>X</b> ] <u>Rule 506</u>	[ ] Section 4(6)	[]ULO
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Type of Filing: [X] New Filing [] Amendment

# A. BASIC IDENTIFICATION DATA

1. Enter the information requested about the issuer

Name of Issuer ([]] check if this is an amendment and name has changed, and indicate change.)

## MONTEREY DEL MAR, S.A.

Address of Executive Offices (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code)

C/O INGRAM, ORILLAC, CARLES & GUARDIA
CALLE 52 Y ELVRA MENDEZ, EDIFICIO VALLARINO, 5TO PISO, LOCAL #2
PANAMA, REPUBLIC OF PANAMA
011-506-232-2525

OR

Address of Principal Busin Telephone Number (Incluing different from Executive	
Brief Description of Busin	ess
Real estate and resort d	evelopment along the Pacific coast of Costa Rica.
Type of Business Organiz	eation
[X] corporation	[ ] limited partnership, already formed [ ] other (please specify):
[ ] business trust	[ ] limited partnership, to be formed
	Month Year
	of Incorporation or Organization: [ <b>06</b> ] [ <b>2002</b> ] [ <b>X</b> ] Actual [ ] Estimated on or Organization: (Enter two-letter U.S. Postal Service abbreviation for State:
ourisation of mostporation	CN for Canada; FN for other foreign jurisdiction) [FN]

#### **GENERAL INSTRUCTIONS**

#### Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

#### State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this

	A. BASIC IDENT	IFICATION DATA		
2. Enter the informa	tion requested for the following	ng:		
<ul> <li>Each benefind disposition of the control of the contr</li></ul>	oter of the issuer, if the issuer icial owner having the power of, 10% or more of a class of tive officer and director of columniary of partners of partners of partner of partn	to vote or dispose, or dir equity securities of the is rporate issuers and of co s; and	ect the vote or ssuer;	
Check Box(es) that Apply:	[ ] Promoter [ X ] Beneficia Owner	I [X] Executive Officer	[X] Director [] Genera Managi Partner	ing
Full Name (Last nar	ne first, if individual)	DEMES, ROBERT W.		
	ence Address (Number and RICKELL AVE. #51, NU			
Check Box(es) that	[ ] Promoter [ X ] Beneficia	I [ X ] Executive Officer	[ X ] Director [ ] Genera Manag	al and/or ing Partne
Apply:	Owner	<b>UU</b> .		
		LEON, WILLIAM RAME	RIZ	
Full Name (Last nar		LEON, WILLIAM RAME reet, City, State, Zip Cod #3, OFICINA #10, S	e)	
Full Name (Last nar Business or Resider OFICENTRO	ne first, if individual) nce Address (Number and St	LEON, WILLIAM RAME reet, City, State, Zip Cod ) #3, OFICINA #10, S CA	e) AN JOSE, COSTA  [X] Director [] Genera	al and/or ing Partne
Full Name (Last nar Business or Resider OFICENTRO  Check Box(es) that	ne first, if individual) nce Address (Number and St. LA SABANA, EDIFICIO RIC  [ ] Promoter [ X ] Beneficia Owner	LEON, WILLIAM RAME reet, City, State, Zip Cod 9 #3, OFICINA #10, S CA	e) AN JOSE, COSTA  [X] Director [] Genera	
Full Name (Last nar Business or Resider OFICENTRO  Check Box(es) that Apply: Full Name (Last nar Business or Resider	ne first, if individual) nce Address (Number and St. LA SABANA, EDIFICIO RIC  [ ] Promoter [ X ] Beneficia Owner  ne first, if individual) nce Address (Number and St. LA SABANA, EDIFICIO	reet, City, State, Zip Cod #3, OFICINA #10, S CA    X   Executive Officer  CALDERON, CARLOS	e) AN JOSE, COSTA  [X] Director [] General Manage	
Full Name (Last nar Business or Resider OFICENTRO Check Box(es) that Apply: Full Name (Last nar Business or Resider OFICENTRO	ne first, if individual) nce Address (Number and St. LA SABANA, EDIFICIO RIC  [ ] Promoter [ X ] Beneficia Owner  ne first, if individual) nce Address (Number and St. LA SABANA, EDIFICIO	reet, City, State, Zip Cod #3, OFICINA #10, S  CA  [X] Executive Officer  CALDERON, CARLOS  reet, City, State, Zip Cod #3, OFICINA #10, S  CA	e) AN JOSE, COSTA  [X] Director [] General Manage  e) AN JOSE, COSTA	

1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this

2. What is the minimum investment that will be accepted from any individual?.....

Answer also in Appendix, Column 2, if filing under ULOE.

offering?.....

Yes

[ ]

\$50,000.00

No [X]

3. Doe	es the o	ffering p	ermit jo	int owne	ership of	a single	unit?					Yes [ ]	No [ <b>X</b> ]
or indi with sa a brok brokei	irectly, a ales of s er or de r or deal	any com securitie ealer reg ler. If m	mission is in the pistered ore than	or simila offering with the five (5)	ar remur If a per SEC an persons	neration son to b d/or with to be lis	for solici e listed i n a state sted are	tation of	purchase pociated pociated position person purchase purch	ers in co person on mame of ms of su		tly	,
Full N	ame (La	ast name	e first, if	individu	al)	NOT	APPLIC	CABLE				<del></del>	
	ess or R		e Addre	ess (Nur	nber and	d Street,	City, Sta	ate, Zip C	Code)	NOT		<del></del>	
Name	of Asso	ciated I	Broker o	r Dealer	•	NOT	APPLIC	ABLE					
	in Whic		on Listed	d Has S	olicited o	or Intend	s to Soli	cit Purch	asers	NOT			
			or chec	k indiv	ridual S	tates)		•••		ſ	] All S	States	
AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	(DE)	[DC]	[FL]	[GA]	[HI]	[ID]	
[IL]	[IN]	[AI]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]	
[TM]	[NE]	[NV]	[NH]	[NJ]	[MM]	[NY]	[NC]	[ND]	[HO]	[OK]	[OR]	[PA]	
[RI]	[SC]	[SD]	[TN]	[XT]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]	
(	Use bla	nk she	et, or c	opy and	use ad	ditional	copies	of this s	heet, as	neces	sary.)	<del></del>	
C. (	OFFERI	NG PR	ICE, NU	MBER	OF INVE	STORS	, EXPEN	ISES AN	ID USE	OF PRO	CEEDS		
and th If the t the co	e total a ransact lumns b	amount i	already : n exchar e amour	sold. En nge offe	iter "0" if ring, che	answer ck this t	is "none	his offeri " or "zero I indicate Ichange	<b>o."</b>				
									Α	ggrega	te Am	ount Alr	eadv
		Security							Off	ering P	rice	Sold	
			LICABL						\$		\$ <u></u>		
E	quity					referrec	 I		\$ <u>1,/</u>	50,000.0	<u>00 \$20</u>	0.000.0	<u>u</u>
C	:onvertil	-	-				APPLIC	ARIF	\$		\$		
			ests N	_		•			\$		<del>*</del> -		
		•	NOT AP						\$		\$_		
							nder UL		\$ <u>1,7</u>	50,000.0	<u>00</u> \$ <u>20</u>	0.000.0	<u>0</u>
ourcha their p persor	er the no ased sec urchase ns who l r purcha	umber o curities es. For o nave pu	of accrection this of offerings rchased	lited and ffering a under <u>F</u> securiti	d non-ac nd the a Rule 504 es and t	credited ggregat , indicat he aggre	investor e dollar a	s who ha amounts mber of llar amou	of	APPLI	CABLE.		

NOT APPLICABLE NOT RULE 504  Accredited Investors NOT APPLICABLE Non-accredited Investors NOT APPLICABLE. Total (for filings under Rule 504 only) . NOT APPLICABLE Answer also in Appendix, Column 4, if filing under ULOE.	Number Investors  0  0  0	Aggregate Dollar Amount of Purchases \$0.00 \$0.00 \$0.00
3. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1.	NOT APPLICAE	BLE.
Type of offering Rule 505	[ ] [ X [ X [ X [ ] ABLE. [ ] [ ]	\$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 32,000.00 \$ 5,000.00 \$ \$ \$ \$ \$ \$
C - Question 1 and total expenses furnished in response to Part C - Questifference is the "adjusted gross proceeds to the issuer."	Payments to Officers, Directors, &	\$ <u>1,712,500.00</u> Payments To
Salaries and fees Purchase of real estate	Affiliates []\$ []\$	Others [X] \$ <u>147,500.00</u> [ ] \$ <u>835,000.00</u>

	Purchase, rental or leasing and installation of ma and equipment	chinery [	]\$	[X] \$ <u>125,000.00</u>
	Construction or leasing of plant buildings and fac	ilities	]\$	[X] \$ <u>340,000.00</u>
	Acquisition of other businesses (including the val	_		[-1] -
	securities involved in this offering that may be us	sed in	1 ¢	11 <b>e</b>
	exchange for the assets or securities of another	155061	] \$	[]\$
	pursuant to a merger) NOT APPLICABLE.			
	Repayment of indebtedness NOT APPLICA	•	] \$	[]\$
	Working capital	-	]\$	[X] \$ 50,000.00
	Other (specify): LICENSES AND PERMITS		] \$	[X] \$ <u>40,000.00</u>
	ADVERTISING AND MARKETING		] \$	[X] \$ 100,000.00
	RESORT STARTUP COSTS	Ĺ	] \$	[X] \$ <u>75,000.00</u>
	Column Totals	. 1	] \$ <u>0-</u>	[X] \$ <u>1,712,500.00</u>
	Total Payments Listed (column totals added)	•		12,500.00
	, , , , , , , , , , , , , , , , , , ,			
	D. FEDERAL SIGN	ATURE		
				1.0
	The issuer has duly caused this notice to be signed by this notice is filed under Rule 505, the following signat			
	to furnish to the U.S. Securities and Exchange Commi			
	information furnished by the issuer to any non-accredi			
	Rule 502.			
		0:	THE OWNER OF THE OWNER OWNER.	
	Issuer (Print or Type)	Signature	$\bigcap$	Date
	MONTEREY DEL MAR, S.A.	( 54/81/	Lenu	8/22/02
	Name of Signer (Print or Type)	Title of Signer (Print	or Type)	
	James C. Sant C. March		, , , , , , , , , , , , , , , , , , ,	
	ROBERT W. DEMES	PRESIDENT		
	ATTENTION			
Inten	tional misstatements or omissions of fact constitute 18 U.S.C. 1001.)	rederal criminal vio	lations. (See	
	E. STATE SIGNA	TURE		
	Is any party described in 17 CFR 230.262 presently	subject to any of the	disqualification	Yes No
	provisions of such rule?			[][X]"
	See Appendix, Column 5, fo	r state response.		• •
	<ol><li>The undersigned issuer hereby undertakes to furnis which this notice is filed, a notice on Form D (17 CFR)</li></ol>			
	law.	239,000) at Such tim	es as required D	y state
	IGITT.			

- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this

notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type)	Signature	Date
MONTEREY DEL MAR, S.A.	Son Stann	8/22/02
Name of Signer (Print or Type)	Title (Print or Type)	
ROBERT W. DEMES	PRESIDENT	

## Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

# APPENDIX 1 2 3 4 5 Disqualification under State ULOE (if yes, attach explanation of investors in State offered in state of the state o

	investors in State offered in state amount purchased in State				waiver granted)				
Part B-Item 1) (Part C-Item 1)   Number Accredite Investor AL					(Part C-Item 2) (Part E-Item 1				
				Number of Accredited		Number of Non-Accredited			
State	Yes	No	EQUITY	Investors	Amount	Investors	Amount	Yes	No
AL		X	<b>\$-0-</b>	-0-		-0-			X
AK		X	\$-0-	-0-		-0-			X
AZ		X	\$250,000	-0-		-0-			X
AR		X	\$-0-	-0-		-0-			X
CA		X	\$250,000	1	\$50,000	-0-			X
СО		X	\$250,000	1	\$50,000	-0-			X
СТ		X	\$-0-	-0-		-0-			X
DE		X	<b>\$-0</b> -	-0-		-0-			X
DC		X	\$-0-	-0-		-0-			X
FL		X	\$250,000	-0-		-0-			X
GA		X	\$-0-	-0-		-0-			X
HI		X	\$-0-	-0-		-0-			X
ID		X	<b>\$-0</b> -	-0-		-0-			X
IL		X	\$-0-	-0-		-0-			X

	Addition of the second state of the second sta			The state of the s	MATTER DATON DESIGNATION OF THE ACTION OF THE PARTY AND TH	THE OWNER WATER A PROPERTY OF THE PARTY OF T
IN	X	\$-0-	-0-		-0-	X
IA	X	<b>\$-0-</b>	-0-		-0-	X
KS	X	\$-0-	-0-		-0-	X
KY	X	\$-0-	-0-		-0-	X
LA	X	\$-0-	-0-		-0-	X
ME	X	\$-0-	-0-		-0-	X
MD	X	\$-0-	-0-		-0-	X
MA	X	\$-0-	-0-		-0-	X
MI	X	<b>\$-0-</b>	-0-		-0-	X
MN	X	\$-0-	-0-		-0-	X
MS	X	\$-0-	-0-		-0-	X
MO	X	\$-0-	-0-		-0-	X
MT	X	\$-0-	-0-		-0-	X
NE	X	\$-0-	-0-		-0-	X
NV	X	\$250,000	-0-		-0-	X
NH	X	\$-0-	-0-		-0-	X
NJ	X	\$-0-	-0-		-0-	X
NM	X	\$-0-	-0-		-0-	X
NY	X	\$-0-	-0-		-0-	X
NC	X	\$250,000	1	\$50,000	-0-	X
ND	X	\$-0-	-0-		-0-	X
ОН	X	\$250,000	1	\$50,000	-0-	X
ОК	X	\$-0-	-0-		-0-	X
OR	X	<b>\$-0-</b>	-0-		-0-	X
PA	X	<b>\$-0-</b>	-0-		-0-	X
RI	X	\$-0-	-0-		-0-	X
sc	X	\$-0-	-0-		-0-	X
SD	X	<b>\$-0-</b>	-0-		-0-	X
TN	X	<b>\$-0-</b>	-0-		-0-	X
TX	X	<b>\$-0-</b>	-0-		-0-	X
UT	X	\$-0-	-0-		-0-	X
VT	X	\$-0-	-0-		-0-	X
VA	X	\$-0-	-0-		-0-	X
WA	X	<b>\$-0-</b>	-0-		-0-	X
w	X	\$-0-	-0-		-0-	X
WI	X	\$-0-	-0-		-0-	X
WY	X	<b>\$-0-</b>	-0-		-0-	X
PR	X	\$-0-	-0-	I	-0-	X